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				Caleura	of and	(Depositor's name) (Signature)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	October 16		(Date)
10/516,812	12/04/2004		Marko Hocevar		ATTORNEY DOCKET NO.	CONFIRMATION NO
TITLE OF INVENTION:	: METHOD AND SYST	EM FOR INTERWORK	CING BETWEEN VIDEO	COMMUNICATIO	P17037-US1 N TERMINALS	5258
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0	\$1810	10/19/2009
	EXAMINER		CLASS-SUBCLASS]		
GAUTHIER, GERALD . Change of correspondence address or indication of "Fo		2614	370-352000	_		
FR 1.363). ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custom Number is required. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 3			
recordation as set forth (A) NAME OF ASSIGN	ss an assignee is identifin 37 CFR 3.11. Compl	ied below, no assignee etion of this form is NOT	data will appear on the pa F a substitute for filing an a (B) RESIDENCE: (CITY	tent. If an assignee assignment	is identified below, the doc	rument has been filed for
	iebolaget L M		UBL)	Stockholm,		
Please check the appropriat		ategories (will not be pri	nted on the patent):	Individual 🗵 Corp	oration or other private grou	p entity Government
4a. The following fec(s) are Issue Fee Publication Fee (No Advance Order - # o	small entity discount pe	rmitted)	4b. Payment of Fcc(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-1379 (enclose an extra copy of this form).			
5. Change in Entity Status a. Applicant claims S	(from status indicated a	ibove)			U-13/9 (chelose an e	xira copy of this form).
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Authorized Signature	Stoven W-	Amen Hadellark	Juice.		er 16,2009	assignce or other party in
Typed or printed name _	Steven W. Sm	th	Projection No. 2C COA			
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